CALIFORNIA FORM 70 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS FAIR POLITICAL CTICES COMMISSICOVER PAGE

AMENDMENT

	Date Received	
(1)	RECEIVED	25/ 15/
3 7 8	APR 0 4 2011 -	678
100/	SAN SERNARDINO COUNTY BOARD OF	/6/
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/6	WHY WHY TO	<u>/</u>

			Public Document	ACTU OF ZUIT
Ple	ease type or print in ink.	TT AIN TO MITH	, is none 200 min.	(17) SAN BERNARDING COUNTY BOARD OF
NA	ME OF FILER	(LAST)	(FIRST)	(MDDCE) Sound
G	onzales		Josie	The Vind II
1.	Office, Agency, or Court			
	Agency Name			
	Board of Supervisors			
	Division, Board, Department, District	, if applicable	Your Position	
	Board Member		Supervisor	
	► If filing for multiple positions, list t	pelow or on an attachment.		
	Agency: See attached list		Position: Member/De	legate/Chair/Alternate
2.	Jurisdiction of Office (Che	ck at least one box)		
	State		Judge (Statewide Jurisd	liction)
	Multi-County		County of San Bern	ardino
	City of	·	Other	
3	Type of Statement (Check a	of least one hov)		
٠.	Annual: The period covered is	•	nber 31. Leaving Office: Date	Left/
	2010. -or-		(Check one)	
	The period covered is2010.	_/, through Decem	ber 31, O The period covered leaving office.	is January 1, 2010, through the date of
	Assuming Office: Date		 The period covered of leaving office. 	is, through the date
	Candidate: Election Year	Office sough	nt, if different than Part 1:	
4.	Schedule Summary	<u> </u>		
	Check applicable schedules or "N	one."	► Total number of pages including	g this cover page:
	Schedule A-1 - Investments - s	schedule attached	Schedule C - Income, I oans	, & Business Positions - schedule attached
	Schedule A-2 - Investments - s		Schedule D - Income - Gifts	
	Schedule B - Real Property - s	chedule attached	Schedule E - Income - Gifts	- Travel Payments - schedule attached
		-or-		
		None - No reportabl	e interests on any schedule	
_		, , , , , , , , , , , , , , , ,		
				-
				ኒ
	: I certify under penalty of perjury t	under the laws of the State of I	California	
	r certify differ penalty of penalty t	itidet the idea of the state of t	Samonna	
	Date Signed April 4	, 2011	Sigr	

Sigr

(month, day, year)

• Agua Mansa Industrial Growth Association – Chair PRACTICES COMMISSION

• Authority for the Handicapped Joint Power Authority - Delegate

- Consolidated Fire Agencies of East Valley Board Member | | APR 8 AM | | : 40
- FIRST 5/San Bernardino Children & Families First Commission Chair
- Indian Gaming Local Benefit Committee
- Inland Valley Development Authority Board Co-Chair
- Interagency Council on Homelessness Chair
- OMNITRANS Board of Directors Board Member
- OWOW Steering Committee Member
- SANBAG Consolidated Transportation Services Agency Ad Hoc Committee Member
- San Bernardino Associated Governments Board Member
- San Bernardino International Airport Authority Commission Member
- San Bernardino Regional Emergency Training Center JPA Member
- San Bernardino Regional Water Resources Authority of the City of San Bernardino Board Member
- San Bernardino Valley Municipal Water District, Advisory Commision on Water Policy -Member
- Santa Ana River Policy Advisory Group Alternate
- Santa Ana Water Project Authority/One Water-One Watershed Board Member
- <u>South Coast Air Quality Management District</u> Board Member representing San Bernardino County
 - o Administrative Committee Member
 - o Mobile Source Committee Member
 - o Stationary Source Committee Member
 - Technology Committee Chair
 - California Fuel Cell Partnership Vice Chair
 - o Climate Change Committee Member
 - o Brain & Lung Tumor and Air Pollution Foundation Member

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

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SAN BERNARDING

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(MIDLE) SCRIEG

AME OF FILER (LAST) Gonzales, Josie 1. Office, Agency, or Court Agency Name Board of Supervisors Division, Board, Department, District, if applicable -Your Position Board Member <u>Supervisor</u> ▶ If filing for multiple positions, list below or on an attachment. Agency Aqua Mansa Industrial Growth Association Position: Delegate 2. Jurisdiction of Office (Check at least one box) ☐ Judge (Statewide Jurisdiction) ☐ State X County of San Bernardino Multi-County ____ City of _ Other .. 3. Type of Statement (Check at least one box) [X] Annual: The period covered is January 1, 2010, through December 31, Leaving Office: Date Left ___ 2010. (Check one) The period covered is January 1, 2010, through the date of The period covered is ____/___, through December 31. leaving office, 2010. O The period covered is _____/___, through the date Assuming Office: Date _______ of leaving office. Candidate: Election Year ___ Office sought, if different than Part 1: _ 4. Schedule Summary Check applicable schedules or "None." ► Total number of pages including this cover page: __ Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached X Schedule D - Income - Gifts - schedule attached X Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or-None - No reportable interests on any schedule 5. Verification MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

(d)(5)

Signature

FPPC Form 700 (2010/2011)
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

03/31/2011

(month, day, year)

Date Signed ____

Section 1 Additional Agency(ies)/Position(s) for Gonzales, Josie:

Agency

Omnitrans Board of Directors
San Bernardino International Airport
San Bernardino Assoc of Govern
SB County Interagency Homeless Council
San Bernardino Valley Muni Water Dis
San Bernardino Regl Water Resources
San Bernardino Regl Emerg Train Ctr
So Coast Air Olty Management Dist
First 5
Consolidated Fire Agencies E. Valley
Indian Gaming Local Benefit Committee

Position

Member
Delegate
Member
Delegate
Delegate
Delegate
Delegate
Member
Chair
Delegate
Alternate

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Gonzales, Josie

-	NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENTITY
	Promerica Bank		
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY		GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	Lending/Banking Institution		
	FAIR MARKET VALUE		FAIR MARKET VALUE
	☐ \$2,000 - \$10,000 X \$10,001 - \$100,000		S2,000 - \$10,000 S10,001 - \$100,000
	S100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	1	NATURE OF INVESTMENT
	X Stock Other		Stock Other
	(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)		(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	, , , , ,		
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
<u> </u>	NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENTITY
-			
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY		GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	FAIR MARKET VALUE		FAIR MARKET VALUE
	\$2,000 - \$10,000 \$10,001 - \$100,000	1	\$2,000 - \$10,000 \$10,001 - \$100,000
	S100,001 - \$1,000,000 Over \$1,000,000		S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT Slock Other		NATURE OF INVESTMENT Stock Other
	(Describe)	1	(Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
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		H	
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
_	NAME OF BUSINESS ENTITY	╫╴	NAME OF BUSINESS ENTITY
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY		GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	FAIR MARKET VALUE		FAIR MARKET VALUE
	S2,000 - \$10,000		S2,000 - \$10,000 S10,001 - \$100,000
	S100,001 - \$1,000,000 Over \$1,000,000		S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
	Stock Other].	Stock Other
	(Describe)		(Describe)
•	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	<u></u>	}	<u></u>
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
	'	•	·
Çc	mments:		

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM	
Name	
Gonzales. Josie	Ē

STREET ADDRESS OR PRECISE LOCATION	► STREET ADDRESS OR PRECISE LOCATION
9097 Sierra Avenue	16705 Ivv
CITY .	CITY
FONTAINA CA 92335 FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$\times \$10,001 - \$100,000	FONTANA CA 92335 FAIR MARKET VALUE F APPLICABLE, LIST DATE: \$2,000 - \$10,000 /_ /_ /_ /_ \$10,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
X Ownership/Deed of Trust	
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
□ \$0 - \$499 □ \$500 - \$1,000 □ \$1,001 - \$10,000	☐ \$0 - \$499 ☐ \$500 - \$1,000
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
income of \$10,000 or more.	
You are not required to report loans from commerce of business on terms available to members of the	ial lending institutions made in the lender's regular course public without regard to your official status. Personal loans of business must be disclosed as follows:
You are not required to report loans from commerce of business on terms available to members of the	public without regard to your official status. Personal loans
You are not required to report loans from commerce of business on terms available to members of the pand loans received not in a lender's regular course NAME OF LENDER*	oublic without regard to your official status. Personal loans of business must be disclosed as follows:
You are not required to report loans from commerce of business on terms available to members of the and loans received not in a lender's regular course	oublic without regard to your official status. Personal loans of business must be disclosed as follows: NAME OF LENDER*
You are not required to report loans from commerce of business on terms available to members of the land loans received not in a lender's regular course NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	Dublic without regard to your official status. Personal loans of business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
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You are not required to report loans from commerce of business on terms available to members of the land loans received not in a lender's regular course NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	Dublic without regard to your official status. Personal loans of business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
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SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name Gonzales, Josie

	► STREET ADDRESS OR PRECISE LOCATION
698 Walnut Street	9087 Sierra Avenue
CITY	CITY
Colton CA 92324	Fontana CA 92335
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSED	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$\times \$10,001 - \$1,000,000 \$\times \$100,001 - \$1,000,000 \$\times \$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
X Ownership/Deed of Trust	X Ownership/Deed of Trust
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
X \$0 - \$499	S0 - \$499 S500 - \$1,000 S1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	X \$10,001 - \$100,000 ☐ OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
	lending institutions made in the lender's regular course blic without regard to your official status. Personal loans f business must be disclosed as follows:
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SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 70	
Name	
Gonzales, Josie	

► STREET ADDRESS OR PRECISE LOCATION	► STREET ADDRESS OR PRECISE LOCATION
9089 Sierra Avenue	9091 Sierra Avenue
CITY	CITY
FORTARIA CA 92335 FAIR MARKET VALUE	FONTANA CA 92335 FAIR MARKET VALUE
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000 SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	IF RENTAL PROPERTY, GROSS INCOME RECEIVED \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000 SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
of business on terms available to members of the pu	blic without regard to your official status. Personal loans
of business on terms available to members of the pu and loans received not in a lender's regular course o	blic without regard to your official status. Personal loans f business must be disclosed as follows:
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SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Gonzales. Josie

STREET ADDRESS OR PRECISE LOCATION	► STREET ADDRESS OR PRECISE LOCATION
9093 Sierra Avenue	16929 Martin
CITY	CITY
FORTAINA CA 92335 FAIR MARKET VALUE	Fontana CA 92335 FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$\times \$10,001 - \$100,000
NATURE OF INTEREST	NATURE OF INTEREST
X Ownership/Deed of Trust ☐ Easement	X Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 X \$1,001 - \$10,000	区 \$0 - \$499 S500 - \$1,000 S1,001 - \$10,000
\$10,001 - \$100,000 QVER \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
	lending institutions made in the lender's regular course olic without regard to your official status. Personal loans business must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
%	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
S500 - \$1,000 S1,001 - \$10,000	S500 - \$1,000 S1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
Comments:	1

SCHEDULE D Income - Gifts

CALIFORNIA FORM 70 FAIR POLITICAL PRACTICES COMMISSI	
Name	
Convalee Josie	

► NAME OF SOURCE	► NAME OF SOURCE	
District Administration IIA	Gabrera Garden Marke	h- II <i>O</i>
Platinum Advisors, LLC	Cabrera Capital Markets, LLC	
ADDRESS (Business Address Acceptable) 1215 K. Street, Suite 1150	ADDRESS (Business Address Acceptable) 633 West 5th St.	
Sacramento CA 95814	Los Angeles CA 90071	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
, .	BOSINESS ACTIVITY, II ANT, OF SOC	NOL
Platinum Advisors Sponsored Dinner	Dinner	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)
	l i	
11/16/10 \$ 110.62 Dinner	11/17/10 \$ 50.00	Dinner
	<u> </u>	
/		
·	i	• *
/		- e ⁽²⁾
	(
► NAME OF SOURCE	NAME OF SOURCE	
SB County Farm Bureau	Watson & Associates	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable) 101 Main St. Suite A	
210 S. Riverside Ave		
Rialto CA 92376	Seal Beach CA 90740	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOU	RCE
Farm Bureau	Development	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)
		.,
12,15,11 \$ 59.90 Large Poinsettia	05/20/10 \$ 65.00	Dinner at Benihana
\$	\$	
	·	
► NAME OF SOURCE	➤ NAME OF SOURCE	
ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable)		le)
	[
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOU	RCF
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)
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Comments:		